

IT-540ES (2003) **LOUISIANA ESTIMATED TAX DECLARATION VOUCHER FOR INDIVIDUALS – 2003**
For calendar year 2003 or fiscal year ending _____ year

I

Your Social Security Number	Spouse's Social Security Number	Payment due date	INDIVIDUAL Voucher 1
-----------------------------	---------------------------------	------------------	---------------------------------

If name, address, or Social Security Number is incorrect, make necessary changes.

To ensure proper credit, please DO NOT fold or staple. Mail this form with your payment to:
Louisiana Department of Revenue

**PO BOX 91007
BATON ROUGE LA 70821-9007**

Amount of payment. **DO NOT SEND CASH.**

\$.00

☐

Mark box if address
has changed.

6230



IT-540ES (2003) **LOUISIANA ESTIMATED TAX DECLARATION VOUCHER FOR INDIVIDUALS – 2003**
For calendar year 2003 or fiscal year ending _____ year

I

Your Social Security Number	Spouse's Social Security Number	Payment due date	INDIVIDUAL Voucher 2
-----------------------------	---------------------------------	------------------	---------------------------------

If name, address, or Social Security Number is incorrect, make necessary changes.

To ensure proper credit, please DO NOT fold or staple. Mail this form with your payment to:
Louisiana Department of Revenue

**PO BOX 91007
BATON ROUGE LA 70821-9007**

Amount of payment. **DO NOT SEND CASH.**

\$.00

☐

Mark box if address
has changed.

6230



IT-540ES (2003) **LOUISIANA ESTIMATED TAX DECLARATION VOUCHER FOR INDIVIDUALS – 2003**
For calendar year 2003 or fiscal year ending _____ year

I

Your Social Security Number	Spouse's Social Security Number	Payment due date	INDIVIDUAL Voucher 3
-----------------------------	---------------------------------	------------------	---------------------------------

If name, address, or Social Security Number is incorrect, make necessary changes.

To ensure proper credit, please DO NOT fold or staple. Mail this form with your payment to:
Louisiana Department of Revenue

**PO BOX 91007
BATON ROUGE LA 70821-9007**

Amount of payment. **DO NOT SEND CASH.**

\$.00

☐

Mark box if address
has changed.

6230



IT-540ES (2003) **LOUISIANA ESTIMATED TAX DECLARATION VOUCHER FOR INDIVIDUALS – 2003**
For calendar year 2003 or fiscal year ending _____ year

I

Your Social Security Number	Spouse's Social Security Number	Payment due date	INDIVIDUAL Voucher 4
-----------------------------	---------------------------------	------------------	---------------------------------

If name, address, or Social Security Number is incorrect, make necessary changes.

To ensure proper credit, please DO NOT fold or staple. Mail this form with your payment to:
Louisiana Department of Revenue

**PO BOX 91007
BATON ROUGE LA 70821-9007**

Amount of payment. **DO NOT SEND CASH.**

\$.00

☐

Mark box if address
has changed.

6230

